FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200002100 (5)

THE ELYSIUM OF BOCA RATON INCORPORATED

FILED Apr 24 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Add	dress			T THE DITTER CONTROL OF THE PARTY OF THE CONTROL OF	
2600 N.W. 51	TH AVENUE	2600 N.W.	2600 N.W. 5TH AVENUE				
BOCA RATON FL 33431		BOCA RAT	BOCA RATON FL 33431			DO NOT WRITE IN THIS	SPACE
ł						3. Date Incorporated or Qualified	O O NOL
						11/04/1992	
2. Principal F	Place of Business	2a. Mailing	Address			4. FEI Number	Applied For
21		26				65-0366835	Not Applicable
Suite, Apt.	. #, etc.	Suite, A	pt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				5 , 50,1,1,52,6 51,51,65	Fee Required
City & Stat	te	City & S	tale			6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	···	Country		Trust Fund Contribution	Added to Fees
24	25	29	36			This corporation owes or has paid the corporation owes or has paid the corporate Tax due June 30.	Yes No
	g. Name and Address of Curr			<u> </u>		10. Name and Address of New Registered	
FIC	ORILLA, JOHN L			81	Name		
	00 NW 5TH AVE			82	Stroot A	ddress (P.O. Box Number is Not Acceptable)	······································
	CA RATON FL 33431			02	Street A	doless (F.O. Box Number is Not Acceptable)	
				83			
}				84	City		85 Zip Code
				64	City	Fi	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607,1508.	Florida Statutes,	the above	-named c	orporation submits this statement for the purpose	of changing its registered
agent. I a	am familiar with, and accept the obl	ligations of, Section	607.0505, Florid	da Statute	rtne corpc 3.	pration's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE							
	Signature, typed or printed name of registered		(NOTE: P		nt signature re	oquired when reinstating) DATE	(D.D.C.C.T.O.D.C. III. 40
12.	PVID	ND DIRECTORS	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	FIORILLA, JOHN L	_		1.2 NAME			La Change La Pacition
STREET ADDRESS	2600 N.W. 5TH AVENUE			1.3 STREET	ANDRECC		
CITY-ST-ZIP	BOCA RATON FL 33431			1.4 CITY - S	1		
TITLE	SD SD		DELETE	2.1 TITLE	1-211		Change Addition
NAME	FIORILLA, MARY	-	_	2.2 NAME			
STREET ADDRESS	2600 N.W. 5TH AVENUE			2.3 STREET	ADORESS		
CITY-ST-ZIP	BOCA RATON FL 33431			2. 4 CITY - S	1		
TITLE	1		DELETE	3.1 TITLE	,,	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME				3.2 NAME			
STREET ADDRESS	,			3 3 STREET	ADDRESS		
CITY-ST-ZIP	<u></u>			3.4. CITY-5	ST-ZIP		
TITLE			DELETE	4.1 TITLE			Change Addition
NAME				4. 2 NAME	1		
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY - S	T-ZIP		
TITLE		1	DELETE	5.1 TITLE			Change Addition
NAME			l	5.2 NAME	ļ		ı
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP			-	5.4 CITY - S	T- ZIP		
TITLE		L	DELETE	6.1 TITLE			Change Addition
NAME				6.2 NAME			ı
STREET ADDRESS	4,			6.3 STREET	address		
CITY-ST-ZIP				6.4 CITY - S	f-ZiP		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: